## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 130 567 6602 200129

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			23		100.0	•	]	RATE	FEE	7	RATE	FEE	
500						50 57704		BASIC FEI	+	-		<del> </del>	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		. 3			X\$ 9=		ОЯ	X\$18=	54	
INDEPENDENT CLAIMS			3 m	inus 3 =				X43=		OR	X86=	<i>'</i>	
М	JLTIPLE DEPE	NDENT CLAIM F					+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	•	TOTAL		OR	TOTAL	824	
CLAIMS AS AMENDED - PART II								:		<u> </u>	OTHER	THAN	
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
<b>AMENDMENT</b>	Total	•	Minus	##		=		X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!   <b> </b>	+145=		OR	+290=		
TOTAL											TOTAL		
								ADDIT. FEEOR ADDIT. FEE					
		(Column 1)		· (Colum		(Column 3)	ìr		ADDI-	1 1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT	•	NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE	·	RATE	TIONAL	
	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X43=		OR	X86=		
٧	FIRST PRESENTATION OF MUI		LTIPLE DEPENDENT		CLAIM		-						
								+145=		OR	+290=		
								TOTAL DOIT. FEE		OR ,	TOTAL ODIT. FEE		
(Column 1) (Column 2) (Column 3)												•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									٠ ا			
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
11	** If the *Highest Number Previously Paid For* IN THIS SPACE is less than 20, enter *20.*  ***If the *Highest Number Previously Paid For* IN THIS SPACE is less than 3, enter *3.*									OR A	TOTAL DDIT. FEE		
		ber Previously Paid					found	in the app	ropriate box	in colu	mn 1.		